

| POSITION | INITIALS | ID NO. | DATE |
|---------------------|-------------------------|----------------------------|-----------------------------------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | <i>Dr</i> | <i>52</i> | <i>10/24</i> |
| FORMALITY REVIEW | <i>20</i> <i>Art</i> | <i>1125</i> <i>1071</i> | <i>11/7/02</i> <i>03/15/02</i> |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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